

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
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 or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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20995 7590 04/04/2007  
**KNOBBE MARTENS OLSON & BEAR LLP**  
 2040 MAIN STREET  
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 IRVINE, CA 92614



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission  
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Kyle F. Schlueter (Depositor's name)  
*Kyle Schlueter* (Signature)  
 27 June 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10621105	07/10/2003	J.T. Lin	SR0LT.005RA	9080

TITLE OF INVENTION: REFRACTIVE SURGERY AND PRESBYOPIA CORRECTION USING INFRARED AND ULTRA VIOLET LASERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0		\$700	10/05/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
COHEN, LEE S	3739	606-005000		01 FC:2501	760.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Knobbe, Martens,  
 Olson & Bear LLP**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Surgilight, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Orlando, FL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.  
☐ Payment by credit card, Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1410 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(c)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Kyle Schlueter*  
 Typed or printed name **Kyle F. Schlueter**

Date **27 June 2007**

Registration No. **54,912**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**Knobbe Martens Olson & Bear LLP**

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**USPTO FACSIMILE TRANSMITTAL SHEET**

Page 1 of 2

Docket No.: SRGLT.005RA/005RX

**CUSTOMER NO. 20995**

Applicant : Jui-Teng Lin  
App. No. : 10/621,105  
→ 90/006,089  
Filed : 10 July 2003 for 10/621,105  
22 August 2001 for 90/006,089  
For : REFRACTIVE SURGERY AND  
PRESBYOPIA CORRECTION USING  
INFRARED AND ULTRAVIOLET  
LASERS  
Examiner : Lee S. Cohen  
Group Art Unit : 3739

**CERTIFICATE OF FAX TRANSMISSION**

I hereby certify that this correspondence  
and all marked attachments are being  
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No. (671) 273-2885 on the date shown  
below:

27 June 2007

  
Kyle F. Schlueter, Reg. No. 54,912

Transmitted herewith for filing and consideration in the above-referenced application are the following items:

- (X) PTOL-85 (Part B - Fee(s) Transmittal)
- (X) Please charge the total fees due in the amount of \$700 for Issue Fee to Deposit Account No. 11-1410.
- (X) Total pages in transmission: 3.

It is certified that on 27 June 2007, a copy of this paper was served in its entirety via First Class U.S. Mail on the attorney of the reexamination requester at the address indicated below:

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San Luis Obispo  
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**Knobbe Martens Olson & Bear LLP**


Application No.: 10/621,105 and 90/006,089

**CUSTOMER NO. 20995**

Filing Date: 10 July 2003 for 10/621,105

22 August 2001 for 90/006,089

The Commissioner is hereby authorized to charge any additional fees which may be required, now or in the future, or credit any overpayment to Account No. 11-1410.

  
\_\_\_\_\_  
Kyle F. Schlueter  
Registration No. 54,912  
Attorney of Record  
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(310) 551-3450

3929554/062607